

PATENT APPLICATION DATA ENTRY FORMAT

Inventor Information

In Inventor One Given Name:	Warren
Middle Initial:	L.
Family Name:	Starkebaum
Name Suffix:	
Postal Address Line One:	4230 Trenton lane
Postal Address Line Two:	
City:	Plymouth
State or Province:	MN
Postal or Zip Code:	55442
Country of Citizenship:	United States of America
In Inventor Two Given Name:	Thomas
Middle Initial:	R.
Family Name:	Prentice
Name Suffix:	
Postal Address Line One:	8151 Hill Trail N.
Postal Address Line Two:	
City:	Lake Elmo
State or Province:	MN
Postal or Zip Code:	55042
Country of Citizenship:	United States of America

Correspondence Information

Correspondence Customer Number: 27581
Electronic Mail: thomas.woods@medtronic.com

Application Information

Title Line One:	Ablation of Stomach Lining To Reduce Stomach
Title Line Two:	Acid Secretion
Title Line Three:	
Total Drawing Sheets:	6
Formal Drawings?:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Application Type:	Utility
Attorney Docket Number:	P-11296.00 US

Representation Information

Representative Customer Number: 27581

Continuity Information

This application is a:

>>Application One:

Filing Date:

Patent Number:

Which is a:

>>Application Two:

Filing Date:

Patent Number:

Which is a:

>> Application Three:

Filing Date:

Patent Number:

Prior Foreign Applications

Foreign Application One:

Filing Date:

Country:

Priority Claimed?:

Yes No

Assignee Information for Inclusion on the Patent Application Publication

Assignee: Medtronic, Inc.

Address: Minneapolis, Minnesota